



JOHN HANNAH, JR. AWARD NOMINATION FORM

Your Name: _____

Your Address: _____

Your Phone: _____

Your Email: _____

Nominee's Name: _____

Nominee's Address: _____

Nominee's Firm affiliate, if any: _____

How long have you known nominee: _____

Please explain why the nominee should be considered for the John Hannah, Jr. Award for Public Service.

(Attach additional pages as needed)

PLEASE RETURN THIS FORM TO: